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FACSIMILE COVER SHEET

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TOTAL NUMBER OF PAGES BEING SENT (INCLUDING COVER SHEET): 13

[] Original documents to follow by mail

[X] No originals will be sent

DATE: April 6, 2004

TO: Examiner Jiping Lu
Group Art Unit 3749

FAX #: 703-872-9306

PHONE #: 703-308-2354

Application No.: 10/636,178
 Applicant: MORRIS et al.
 Due Date: May 24, 2004

OUR REF.: 1915.24US03

FROM: Wm. Larry Alexander
 PHONE #: (612) 349-5757

Attached please find the following document for filing in the above-identified patent application:

- 1) Amendment Transmittal – 2 pages; and
- 2) Amendment in response to Office Action dated February 24, 2004.

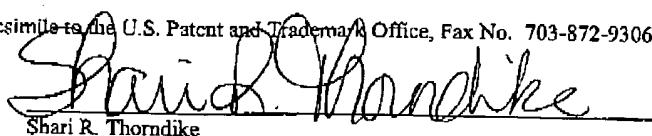
Sincerely,

Wm. Larry Alexander
 Wm. Larry Alexander
 Reg. No. 37,269

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office, Fax No. 703-872-9306 on the date shown below.

April 6, 2004
 Date



Shari R. Thorndike

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Attorney Docket No. 1915.24US03

AMENDMENT TRANSMITTAL

In re the application of:

MORRIS et al.

Confirmation No.: 1767

Application No.: 10/636,178

Examiner: Jiping Lu

Filed: August 7, 2003

Group Art Unit: 3749

For: PRECIPITATION RESISTANT RIDGE VENT

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

Enclosed are:

- Amendment (10 pages).
- Petition for Extension of Period for Response.
- _____

The filing fee has been calculated as shown below:

	Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra (Equals)	Small Entity Rate	Add'l Fee	OR	Large Entity Rate	Add'l Fee
Total	38	- [28]***	= 10	x 9	\$		x 18	\$180
Indep.	6	- [5]***	= 1	x 43	\$		x 86	\$86
Mult. Dep.			=	+ 145	\$		+ 290	\$0
			TOTAL			OR	TOTAL	\$266

 First Presentation of Multiple Dependent Claim [MDC]

* If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

Application No. 10/636,178

[] Applicant(s) is/are entitled to small entity status in accordance with 37 CFR 1.27.

[X] The Commissioner is hereby authorized to charge Deposit Account No. 16-0631 in the amount of \$266.00 for payment of the fees under 37 C.F.R. § 1.16 for presentation of extra claims.

Respectfully submitted,

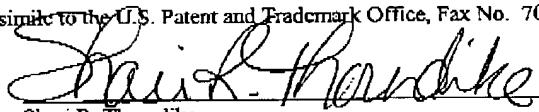

Wm. Larry Alexander
Registration No. 37,269

Please grant any extension of time necessary for entry; charge any fee due to Deposit Account No. 16-0631.

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April 6, 2004
Date


Shari R. Thorndike